

EXHIBIT A

STATE OF WISCONSIN, CIRCUIT COURT, MARATHON COUNTY

Plaintiff: [Name (First, Middle, Last), Address, City, State, Zip]

Keith A. Boneske 245178 State Highway 97 Athens, WI 54411☐ See attached for additional plaintiffs.

-VS-

To: Defendant(s): [Name (First, Middle, Last), Address, City, State, Zip]

Assurity Life Insurance Company c/o Deanna HortonP. O. Box 82533 Lincoln, NE 685017000 Q St.☐ See attached for additional defendants.☐ AmendedTHIS IS AN AUTHENTICATED
COPY OF PLEADINGS FILED
ON THIS DATESummons and Complaint
(Small Claims)Case No. 21SC1096

- ☒ Claim for money (\$10,000 or less) 31001
☐ Tort/Personal injury (\$5,000 or less) 31010
☐ Return of property (replevin) 31003
☐ Eviction 31004
☐ Eviction due to foreclosure 31002
☐ Arbitration award 31006
☐ Return of earnest money 31008

If you require reasonable accommodations due to a disability to participate in the court process, please call 715-261-1310 prior to the scheduled court date. Please note that the court does not provide transportation.

SUMMONS

To the Defendant(s):

You are being sued as described on the attached complaint. If you wish to dispute this matter:

- ☒ You must appear at the time and place stated.
☐ You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

When to Appear/File an Answer

Date 8-4-21 Time 10:00 Am

Place to Appear/File an Answer

Marathon County Courthouse
SQS Memorial Courtroom
500 Forest Street
Wausau WI 54403

Clerk/Attorney Signature

Shirley Long

Date Summons Issued

7-7-21

Date Summons Mailed

SE

STATE OF WISCONSIN

Clerk of Circuit Courts

To serve, please visit:

Dated This 13th day of July 2021

Served By: Shirley LongSignature: Shirley Long

COMPLAINT**Plaintiff's Demand:**

The plaintiff states the following claim against the defendant(s):

1. Plaintiff demands judgment for *(Check as appropriate)*

- ☒ Claim for Money \$ 3,942.50
☐ Tort/Personal Injury \$ _____
☐ Return of property (replevin) *(Describe property in 2 below.) (Not to include Wis. Stats. 425.205 actions to recover collateral.)*
☐ Eviction
☐ Eviction due to foreclosure
☐ Return of Earnest Money
☐ Confirmation, vacation, modification or correction of arbitration award

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.

2. Brief statement of dates and facts:

(If this is an eviction action and you are seeking money damages, you must also state that claim on this form.)

I started a new job in October, 2020. I was eligible for a group accident expense insurance from Assurity, which went into effect on January 1, 2021. On February 19, 2021, I was diagnosed with a herniated disc in my low back and I have been unable to work since. Assurity has denied my claim to receive benefits, claiming a pre-existing condition. I have appealed this decision and sent a letter to Assurity from my doctor stating that this was a new incident and not a pre-existing condition. Assurity denied my appeal. I would like to be paid for the accident expense benefits that I had been guaranteed from the agent when I joined. (Claim No. 202104090087)

☐ See attached for additional information. Provide copy of attachments for court and defendant(s).

I am the: ☒ plaintiff. ☐ attorney for the plaintiff.

► Keith A. Boneske
 Plaintiff's Signature

Keith A. Boneske
 Name Printed or Typed

245178 State Highway 97 Athens, WI 54411
 Address

boneskel@yahoo.com
 Email Address

715-573-0292
 Telephone Number

Date

 Attorney's Signature

 Attorney's Name Printed or Typed

 Attorney's Address

 Attorney's Email Address

 Attorney's Telephone Number

 Date

 State Bar No.